

Work Order ID 105222

\*105222\*

Page 1

Item ID: D407-667-205TRN

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Turning Detail

Start Date: 7/29/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 8/12/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: MLC

Date: 8-27-29 Tooling:

Date:

Run Start \*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D407-667-245

Rev F

100

0.00

\*100\*

MORI SEIKI CNC LATHE LARGE

Mori Seiki

Memo

0.00

Mori Seiki CNC Lathe Large

1-Fill tube with sand & install plugs DT8531 on both ends as per Folio FA248

2-Turn first side as per Folio FA248

3-Blend transition lines only, \*\*do not sand whole tube\*\*

FOLIO REV: \_\_\_\_\_

DWG REV: \_\_\_\_\_

\*Use mill bastard file, brush file repeatedly with file card.

\*Do not use sandpaper coarser than 320 grit.

1 φ KC  
13-9-24

110

QC1- Inspect dimensions to dimension sheet

0.00

\*110\*

QC

Memo

0.00

Quality Control

1 φ KC  
13-9-24

P10

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: ML Date: 14/12/20QA Closed: KA Date: 14-3/19

Work Order: <u>105222</u>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. <u>0407-667-2057RA</u>		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. <u>14-3041</u>		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data		14/2/5	100	1	ORIENT / FB wall thickness measurement below tolerance.  min wall = 0.354 Nom. wall = 0.389	DAS 12 9-89  14/2/5	ORIENT SO NEITHER 0.354 dim or 0.374 is along bottom surface.  Acceptable within allowable of D6011 eccentricity	DAS 12 9-89  14/2/5	JW  14-02-00	DAS 27 9-89  14/3/17
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										

## FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 105222

\*105222\*

Page 2

Item ID: D407-667-205TRN

Accept

\*N900040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Crosstube Turning Detail

Stop

\*NS2\*

Start Date: 7/29/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 8/12/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

0.00

\*120\*

MORI SEIKI CNC LATHE LARGE

Mori Seiki

Memo

0.00

Mori Seiki CNC Lathe Large

1-Turn second side as per Folio FA248

2-Blend transition lines only, \*\*do not sand whole tube\*\*:

\*Use mill bastard file, brush file repeatedly with file card.

\*Do not use sandpaper coarser than 320 grit.

FOLIO REV: AA

DWG REV: 2

3-Remove sand and plugs

4-Scribe part # and batch # using vibrating stylus as per Dwg D407-667-245

1/0  
mm L  
13/09/26

130

QC1- Inspect dimensions to dimension sheet

0.00

\*130\*

QC

Memo

0.00

Quality Control

1/0  
mm L  
13/09/26

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Work Order ID 105222

July-29-13 1:46:36 PM

**\*105222\***

Page 3

Item ID: D407-667-205TRN

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Crosstube Turning Detail

Start Date: 7/29/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/12/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	QC8- Inspect parts - second check	0.00							
<b>*140*</b>									
QC	Memo	0.00							
Quality Control									
145		0.00							
<b>*145*</b>									
Crosstubes	Memo	0.00							
Crosstubes	Grind off circumferential machining marks longitudinally.								
150		0.00							
<b>*150*</b>									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	1- PRESSURE WASH X-TUBE INSIDE AND OUT								
	2- ACID ETCH X-TUBE INSIDE AND OUT. USE RED SCOTCH BRITE								

*JW* 13-09-30

*JS* 14-03-05

*MD* 14/03/05

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 105222

\*105222\*

Page 4

Item ID: D407-667-205TRN

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Crosstube Turning Detail

Start Date: 7/29/13 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 8/12/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date: Run Start \*NR1\*  
QC: Date: SPC (Y/N): Date: Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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160 QC5- Inspect part completeness to step on W/O

0.00

\*160\*

QC

Memo

0.00

Quality Control

DAS  
27  
9-23  
14/3/6

170

0.00

\*170\*

Packaging

Packaging

Memo

0.00

Packaging

Identify and stock in kanban rackLocation: LG

M/O 14/03/06

180

0.00

\*180\*

QC

Memo

0.00

Quality Control

QC21- Final Inspection - Work Order Release

14-03-06  
14-03-06

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



Picklist Print

July-29-13 1:46:40 PM

Work Order ID: 105222

Parent Item: D407-667-205TRN

Parent Item Name: Crosstube Turning Detail

\*105222\*

\*D407-667-205TRN\*

Start Date: 7/29/13

Start Qty: 1.00

Required Date: 8/12/13

Required Qty: 1.00

Comments:

IPP Rev:A 08-03-06 new issue DD verified by:ec  
IPP Rev B 08.04.02 Removed polish EC verified by: DD  
IPP Rev:C 08-08-19 revE as per dwg DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D6011-115

Manufactured No

120

Each

38.0000

1

1

\*D6011-115\*

Crosstube Material

\*\*

Location

Loc Qty

Loc Code

LG015

38

67798

12

69802

5

75639

21

KC 13-09-24

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

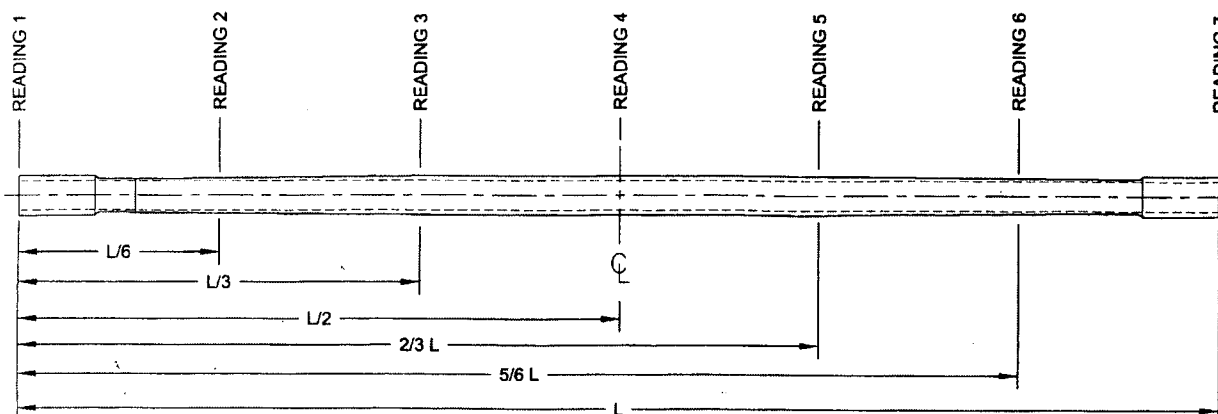
<b>DART AEROSPACE LTD</b>	<b>Work Order:</b> 105222
<b>Description:</b> Crosstube Assembly	<b>Part Number:</b> D407-667-245
<b>Inspection Dwg:</b> D407-667-245 <b>Rev:</b> F	<b>Page 1 of 2</b>

### FIRST ARTICLE INSPECTION CHECKLIST

	Inspection Sheet Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
SIDE A	2.490	+0.005/-0.000	2.491	/		vern	CNC-08
	1.832	+0.005/-0.000	1.832	/		↓	
	1.838	+0.005/-0.000	1.841	/			
	1.892	+0.005/-0.000	1.896	/			
	2.052	+0.005/-0.000	2.054	/			
	2.206	+0.005/-0.000	2.209	/			
	2.521	+0.005/-0.000	2.525	/			
	2.633	+0.005/-0.000	2.636	/			
	4.10	+/-0.030	4.10	/		vern	CNC-08
	4.978	+/-0.030	4.980	/		"	
	2.040	+0.000/-0.010	2.031	/		"	
	0.125	+/-0.010	.120	/		"	
	R0.063	+/-0.010	.063	/		RG	
	R0.500	+/-0.010	.500	/		"	
SIDE B	2.490	+0.005/-0.000	2.490	/		vern	CNC-08
	1.832	+0.005/-0.000	1.832	/		↓	
	1.838	+0.005/-0.000	1.841	/			
	1.892	+0.005/-0.000	1.897	/			
	2.052	+0.005/-0.000	2.054	/			
	2.206	+0.005/-0.000	2.208	/			
	2.521	+0.005/-0.000	2.526	/			
	2.633	+0.005/-0.000	2.635	/			
	4.10	+/-0.030	4.10	/		vern	CNC-08
	4.978	+/-0.030	4.980	/		"	
	2.040	+0.000/-0.010	2.033	/		"	
	0.125	+/-0.010	.125	/		"	
	R0.063	+/-0.010	.063	/		RG	
	R0.500	+/-0.010	.500	/		"	
	112.91	+/-0.020	112.91	/		TAPE	ED-17.

<b>DART AEROSPACE LTD</b>	<b>Work Order:</b> 105222
<b>Description:</b> Crosstube Assembly	<b>Part Number:</b> D407-667-245
<b>Inspection Dwg:</b> D407-667-245 <b>Rev:</b> F	<b>Page 2 of 2</b>

### WALL THICKNESS MEASUREMENT



Location	WALL THICKNESS MEASUREMENT (IN)				Deviation $\Delta w$ (max-min)	TOLERANCE
	w1	w2	w3	w4		
READING 1 L= 0"	.237	.238	.237	.228	.010	0.075"  0.084  0.389 - 0.035
READING 2 L= 17	.228	.271	.232	.204	.067	
READING 3 L= 36	.395	.429	.461	.368	.061	
READING 4 L= 56	.679	.691	.671	.663	.028	
READING 5 L= 36	.422	.438	.374	.354	.076	
READING 6 L= 17	.263	.253	.199	.206	.064	
READING 7 L= cuff	.233	.232	.237	.236	.005	

#### Calibration Result

Actual Block Thickness: 100.756

Sitiescan 250 Measured Thickness: 100.750

<b>Measured by:</b> <i>mmml</i>	<b>Audited by:</b> <i>JW</i>	<b>Preliminary Approval:</b>
<b>Date:</b> 13/09/27	<b>Date:</b> 14-02-06	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
A	04.04.21	New Issue (P/O D407-667-205)	KJ/RF	
B	06.03.09	Dwg Rev updated	KJ/JLM	
C	06.03.30	Tolerance revised for 4.978 dimension	KJ/JLM	
D	07.02.19	Dwg Rev updated	KJ/JLM	
E	09.05.20	Dwg Rev updated	KJ	
F	12.06.04	Wall thickness form added	KJ	

Item	QTY -245	PART NUMBER	DESCRIPTION
1	X	D407-667-245	CROSSTUBE ASSEMBLY (407 HIGH AFT)
2	1	D6011-115	CROSSTUBE
3	2	D2856-400-773	ABRASION STRIP
4	2	D2873-043	NUT PLATE
5	2	D2873-045	NUT PLATE
6	1	D2894-1	SUPPORT
7	2	D3190-1	CHAFING SHIELD
8	2	D3595-063-430	RUBBER CUSHION
9	14	MS20601AD4W8	RIVET (OR NAS9302B-4-8)
10	4	MS21920-22	CLAMP
11	2	MS21920-25	CLAMP (OR MS21920-24)
12	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947- 100, TYPE II, CLASS 2 ADHESIVE)

# **GENERAL NOTES:**

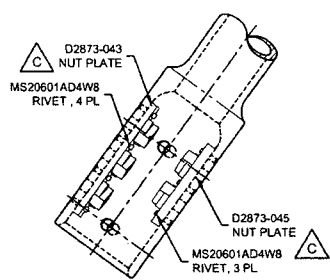
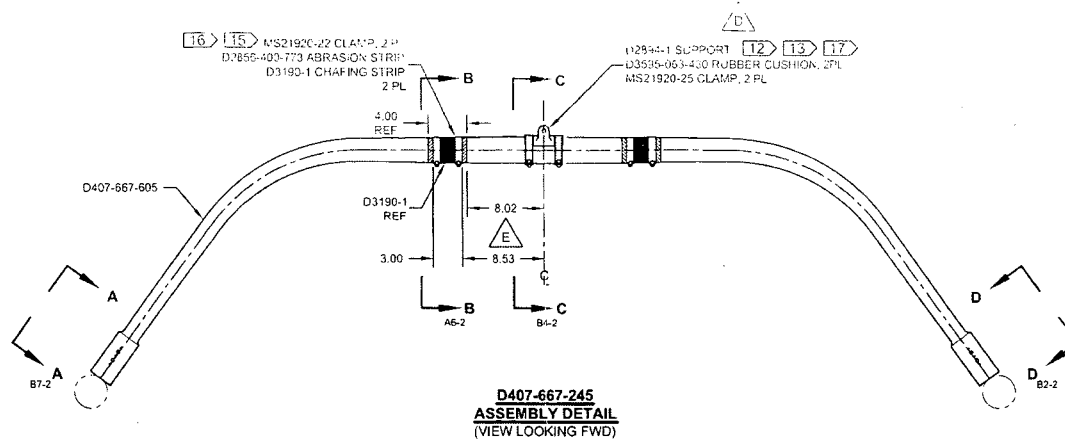
- 1) MATERIAL: MANUFACTURED FROM D6011-115  
FINISHED LENGTH = 112.91±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D407-667-245" AND BATCH NUMBER ON  
INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 27.7 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN-OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 6 PASSES. MAXIMUM TUBE FLATTENING DUE TO  
BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2894-1 CENTER SUPPORT USING A 0.03" TO 0.06" THICK LAYER OF MAGNOBOND  
6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO  
PACKAGING.
- 13) INSTALL MS21920-25 CLAMPS WITH D3595-063-430 RUBBER CUSHIONS TO SECURE D2894-1  
SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE CROSSTUBE  
SUPPORT.  
NOTE: MS21920-24 CLAMPS CAN BE USED TO ACCOMMODATE VARYING DIAMETERS.  
ENSURE THERE IS A MINIMUM OF 1.5 THREADS IN SAFETY ON THE NUTS.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE  
OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS  
SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT  
LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) INSTALL D2856-400-773 ABRASION STRIP WITH A 0.13 (REF) GAP ON BOTTOM SIDE OF  
CROSSTUBE, PER QSI 035.
- 16) INSTALL D3190-1 CHAFING SHIELDS SO THAT OVERLAP IS ON BOTTOM SIDE OF CROSSTUBE  
OPPOSITE D2894-1 SUPPORT.
- 17) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN  
SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

105222 MLS  
13-07-29 @ DEO ATTACHED

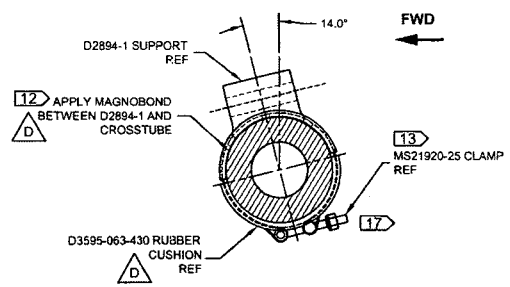
RELEASED  
08/11/12

F	REFORMAT NOTES TO NEW STANDARDS (ZN B8-1); RELOCATED FLAG # 6 (ZN A8-3) PER NCR 210; REMOVED REF. & ADD TOLERANCES (ZN C6-3, C4-3 & D2-3)	RF	08.11.06
E	8.02 AND 8.53 WERE 8.40 AND 8.90 (ZN D5-2); REORGANIZED VIEWS AND REFORMATED DRAWING TO CURRENT STANDARDS. REASONS: CLAMPS MOVED 0.375 TOWARD CL TO ELIMINATE INTERFERENCE WITH AIRCRAFT MOUNTS. REFERENCE: FAR#08-21 AND EGN#1225	MB	08.07.24
D	ADD VIEW FOR OEM SKID HOLES, ROTATE ORIENTATION OF CLAMPS SECTION F-F. REMOVE -851 ABRASION STRIP, ADD MAGNOBOND 6398, ADD CUSHION	PH	07.02.07
C	ADD HOLES AND NUT PLATES FOR COMPATIBILITY WITH BHT/AA SKIDTUBES	PH	05.07.26
B	ADD CHAFING SHIELD	CP	03.05.21
A	NEW ISSUE	CP	02.05.13
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF	DRAWING NO.	REV. F
CHECKED	RF	D407-667-245	SHEET 1 OF 4
MFG. APPR.	RF	TITLE	SCALE
APPROVED	RF	CROSSTUBE ASS'Y (407 HIGH AFT)	NTS
DE APPR.	RF	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY MANNER WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DATE	08.11.06		

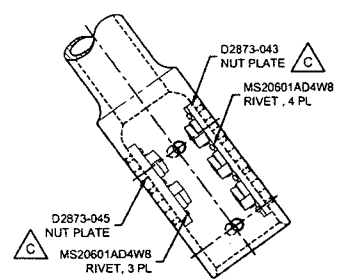
105222



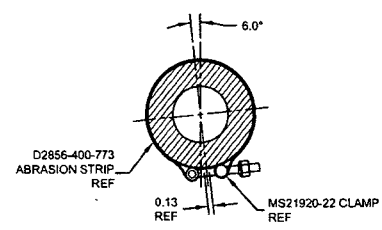
C7-2 **VIEW A-A CUFF DETAIL**  
SCALE 4X



C4-2 **SECTION C-C**  
SCALE 4X



C2-2 **VIEW D-D CUFF DETAIL**  
SCALE 4X



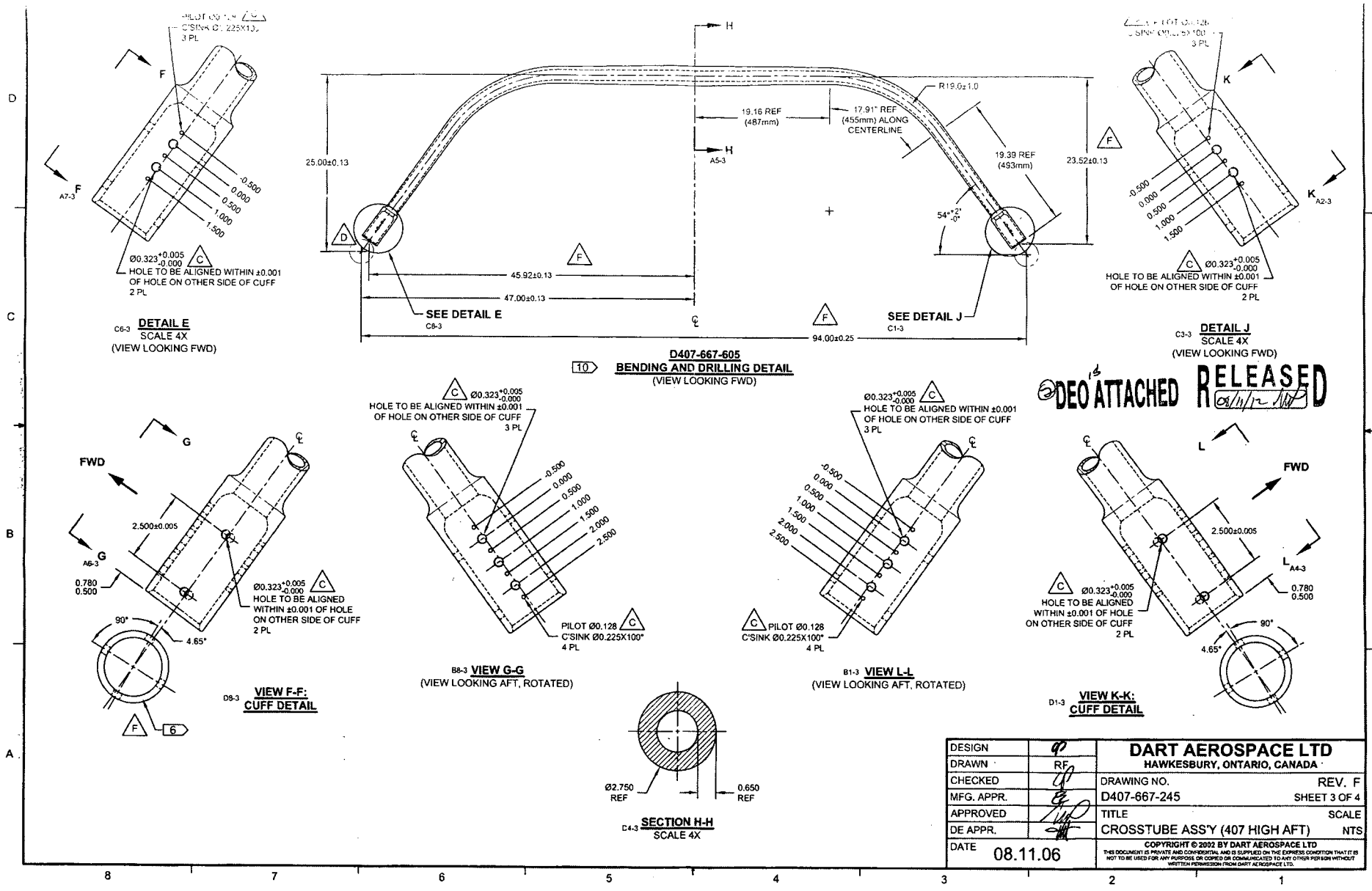
C5-2 **SECTION B-B**  
SCALE 4X, 2PL

**DEO ATTACHED**  
**RELEASED**  
02/11/12

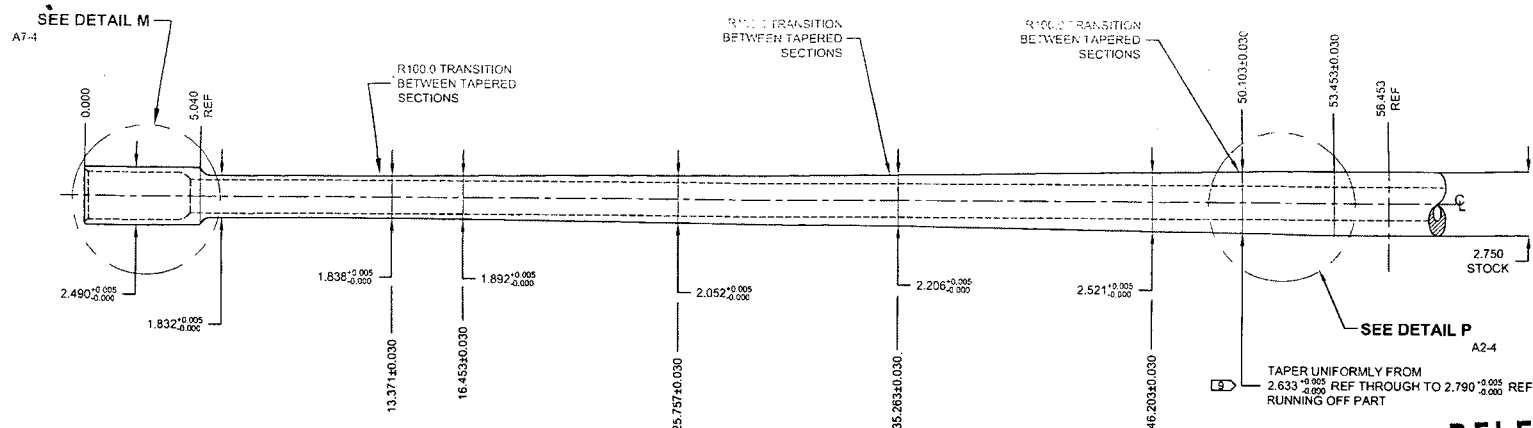
DESIGN	90	<b>DART AEROSPACE LTD</b>
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA
CHECKED	RF	DRAWING NO. REV. F
MFG. APPR.	RF	D407-667-245 SHEET 2 OF 4
APPROVED	RF	TITLE SCALE
DE APPR.	RF	CROSSTUBE ASS'Y (407 HIGH AFT) NTS
DATE	08.11.06	COPYRIGHT © 2002 BY DART AEROSPACE LTD

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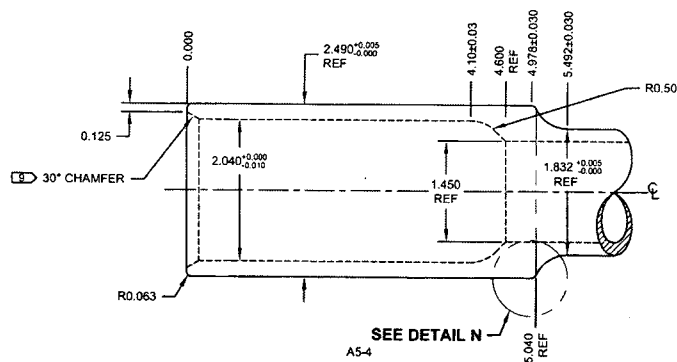


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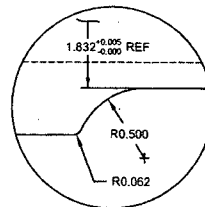


**D407-667-245 MACHINING DETAIL**

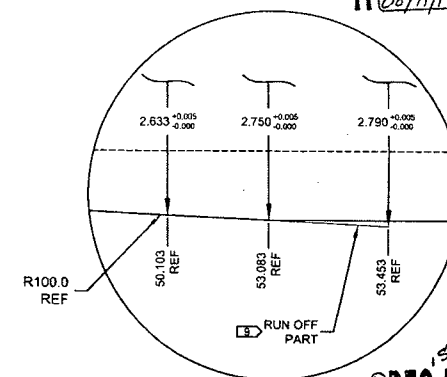
RELEASED  
08/11/12



**DETAIL M: CROSSTUBE CUFF**  
SCALE 3X



**DETAIL N: CUFF TRANSITION**  
SCALE 2X



**DETAIL P: TAPER RUN-OFF**  
NOT TO SCALE

DEO ATTACHED

DESIGN	90	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	90	DRAWING NO.	REV. F
MFG. APPR.	90	D407-667-245	SHEET 4 OF 4
APPROVED	90	TITLE	SCALE
DE APPR.	90	CROSSTUBE ASS'Y (407 HIGH AFT)	NTS
DATE	08.11.06	<small>COPYRIGHT © 2002 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR LOANED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



105222

DRAWING NO. D407-667-245	TITLE CROSSTUBE ASSY (407 HIGH AFT)	REV. F	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D407-667-245-F-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN <i>g</i>	CHECKED <i>g</i>	MFG. APPR. <i>B</i>	APPROVED <i>140</i>	DE APPR. <i>H</i>			
DATE 11.04.08	DATE 11.04.12	DATE 11.04.12	DATE 11.04.12	DATE 11.04.12			

**PURPOSE:**

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890.

**CHANGE:**

PARTS LIST IS AMENDED AS FOLLOWS:

**IS:**

Item	Qty -245	Part Number	Description
3	0	D2856-400-773	ABRASION STRIP

**WAS:**

3	2	D2856-400-773	ABRASION STRIP
---	---	---------------	----------------

NOTES 2 AND 15, SHEET 1 ARE AMENDED AS FOLLOWS:

**IS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
PAINT OUTSIDE PER DART QSI 005 4.2  
REMOVE MASKING AND APPLY CLEAR COAT
- 15) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3190-1  
CHAFING SHIELDS AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL  
PROSEAL D3190-1 CHAFING SHIELDS ONTO CROSSTUBE BY APPLYING A THIN COAT  
OF PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.

**WAS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 15) INSTALL D2856-400-773 ABRASION STRIP WITH A 0.13 REF GAP ON BOTTOM SIDE OF  
CROSSTUBE PER QSI 035.

**RELEASED**  
2011-04-18  
*MD*

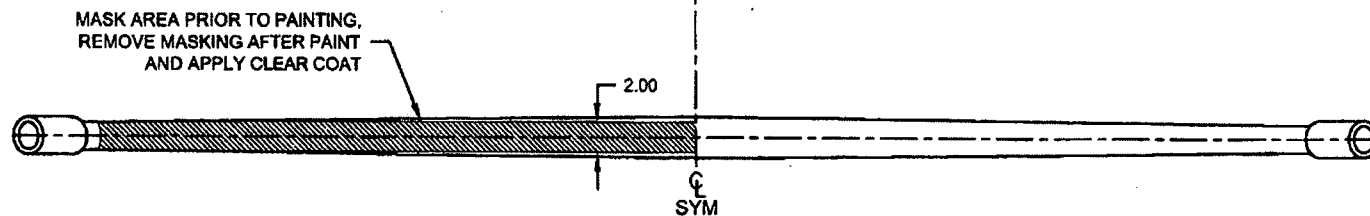
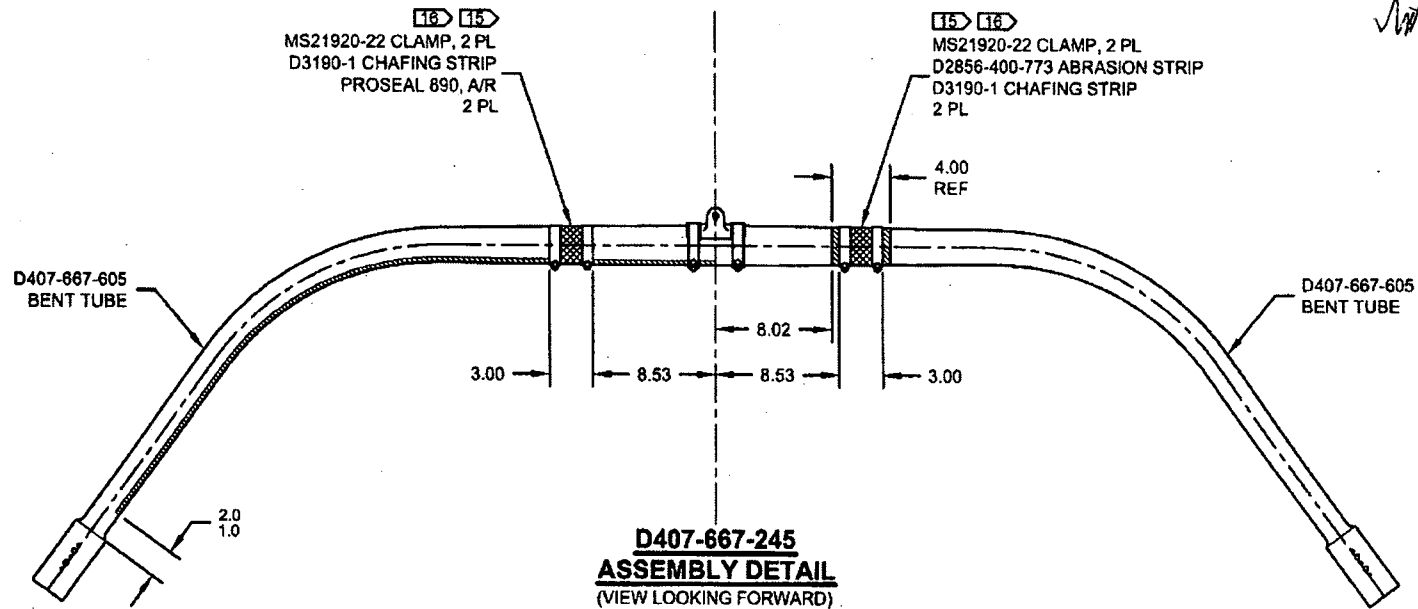
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DRAWING NO. D407-667-245	TITLE CROSSTUBE ASSY (407 HIGH AFT)	REV. F	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D407-667-245-F.1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN	CHECKED <i>UP</i>	MFG. APPR. <i>RE</i>	APPROVED <i>WP</i>	DE APPR. <i>H</i>		
DATE 11.04.08	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

IS:

WAS:

**RELEASED**  
2011-04-18  
*W*



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105222

DRAWING NO. D407-667-245	TITLE CROSSTUBE ASS'Y (407 HIGH AFT)	REV. F	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D407-667-245-F-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN 97	CHECKED ASS	MFG. APPR. E	APPROVED MP		DE APPR. th		
DATE 11.09.07	DATE 11.09.19	DATE 11.09.19	DATE 11.09.19		DATE 11.09.19		

**PURPOSE:**

REPLACE MAGNOBOND WITH 3M DP460 SCOTCH-WELD EPOXY ADHESIVE

**CHANGE:**

IS:

Item	Qty -245	Part Number	Description
12	A/R	SCOTCH-WELD DP460	EPOXY ADHESIVE, 3M SCOTCH-WELD

WAS:

12	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
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NOTE 12 & 17, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) INSTALL D2894-1 CENTER SUPPORT USING A 0.04" TO 0.07" THICK LAYER OF SCOTCH-WELD DP460 PER QSI 015. LET CURE FOR 24 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER ADHESIVE HAS CURED FOR 24 HOURS.

WAS:

- 12) INSTALL D2894-1 CENTER SUPPORT USING A 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS ARE SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

**RELEASED**  
2011-09-29  
MD

